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SECLADATION FOR LITH ITY OF	Attorney Docket Nun	nber	WIW-009.01		
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	<u>r</u>	LIU		
PATENT APPLICATION	COMPL	ETE II	F KNOWN		
(37 CFR 1.63)	Application Number				
☑ Declaration ☐ Declaration	Filing Date				
Submitted OR Submitted after Initial	Group Art Unit	Una	ssigned		
with Initial Filing (surcharge Filing (37 CFR 1.16 (e)) required)	Examiner Name	Una	ssigned		
As a below named inventor, I hereby declare that:  My residence, post office address, and citizenship are as stated below next to my name.  I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  System and Methods for Accent Classification and Adaptation  the specification of which  is attached hereto  OR  was filed on (MM/DD/YYYY)  and was amended on (MM/DD/YYYY)  (if applicable).					

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. **Certified Copy Attached?** Foreign Filing Date **Priority** Prior Foreign Application Country (MM/DD/YYYY) **Not Claimed** Number(s) YES NO Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Application Number(s) Filing Date (MM/DD/YYYY) May 15, 2000 Additional provisional application 60/204,204 numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

amended by any amendment specifically referred to above.

[Page 1 of 2]

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I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.								prior						
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Chiahua (	ahua George Yu 43,301													
Additional	registered	f practitioner(s) na	med on	supplementa	Registere	d Prac	ctitioner	Infor	rmation she	et PTO	/SB/020	attached here	to.	
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Name of Sole or First Inventor:														
Given Name (first and middle [if any])						Family Name or Surname								
Wai Kat LIU														
Inventor's Signature					<u></u>						Date			
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## **ADDITIONAL INVENTOR(S) DECLARATION** Supplemental Sheet Page \_1\_ of \_1\_ Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname **FUNG** Pascale Inventor's Signature Date Hong Kong Clear Water Bay Hong Kong Residence: City Citizenship State Country Weniwen Technologies Limited **Post Office Address** Suite 3637 Enterprise Centre, HKUST **Post Office Address** Hong Kong Clear Water Bay City Country State ZIP Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Signature Date State Country Citizenship Residence: City **Post Office Address Post Office Address** State 7IP Country City Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Family Name or Surname Inventor's Date Signature Citizenship State Residence: City Country **Post Office Address Post Office Address** Country ZIP

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